

AMENDMENTS TO THE CLAIMS

This listing of claims will replace all prior versions, and listings, of claims in the application:

Listing of Claims:

1. (currently amended) A method of treating a patient with an acute myocardial infarction comprising:

administering to the patient an effective amount of a formulation comprising an encapsulated a therapeutic agent encapsulated within a suitable carrier, wherein the formulation reduces a zone of infarct, thereby minimizing the damage following the acute myocardial infarction.

2. (withdrawn) A method of treating a patient with an acute myocardial infarction comprising:

administering to the patient an effective amount of a formulation comprising an embedded agent, wherein the formulation reduces a zone of infarct, thereby minimizing the damage following the acute myocardial infarction.

3. (withdrawn) A method of treating a patient with an acute myocardial infarction comprising:

administering to the patient an effective amount of a formulation comprising a particulate agent, wherein the formulation reduces a zone of infarct, thereby minimizing the damage following the acute myocardial infarction.

4. (original) The method as in one of claims 1-3, wherein the formulation inhibits blood monocytes or tissue macrophages.

5. (original) The method as in one of claims 1-3, wherein the formulation depletes blood monocytes or tissue macrophages.

6. (original) The method as in one of claims 1-3, wherein the formulation has a size range of 0.1-1.0 microns.

7. (original) The method as in one of claims 1-3, wherein the formulation has a size range of 0.1-0.5 microns.

8. (original) The method as in one of claims 1-3, wherein the formulation has a size range of 0.1-0.3 microns.

9. (original) The method as in one of claims 1-3, wherein the formulation has a size range of 0.1-0.18 microns.

10. (original) The method as in one of claims 1-3, wherein the agent is an intra-cellular inhibitor.

11. (withdrawn) The method as in one of claims 1-3, wherein the agent is an intra-cellular deactivator.

12. (withdrawn) The method as in one of claims 1-3, wherein the agent is an intra-cellular arrestor.

13. (withdrawn) The method as in one of claims 1-3, wherein the agent is an intra-cellular toxin.

14. (withdrawn) The method as in one of claims 1-3, wherein the agent is a cytostatic substance.

15. (withdrawn) The method as in one of claims 1-3, wherein the agent is a cytotoxic substance.

16. (original) The method as in one of claims 1-3, wherein the formulation can primarily enter a cell via phagocytosis.

17. (original) The method as in one of claims 1-3, wherein the agent is a bisphosphonate.

18. (withdrawn) The method as in one of claims 1-3, wherein the agent is gallium.

19. (original) The method according to claim 17, wherein the bisphosphonate is selected from the group consisting of clodronate, etidronate, tiludronate, pamidronate, alendronate and risendronate.

20. (currently amended) The method according to claim 1, wherein the agent is encapsulated in suitable carrier is a liposome.

21. (withdrawn) The method according to claim 2, wherein the agent is embedded in a carrier selected from the group consisting of microparticles, nanoparticles, microspheres, and nanospheres.

22. (withdrawn) The method according to claim 3, wherein the particulates are selected from the group consisting of aggregates, flocculates, colloids, polymer chains, insoluble salts and insoluble complexes.

23. (original) The method according to claim 4, wherein inhibition of said monocytes or macrophages occurs through phagocytosis of the formulation.

24. (original) The method according to claim 5, wherein depletion of said monocytes or macrophages occurs through phagocytosis of the formulation.

25. (currently amended) A method of treating an acute myocardial infarction followed by myocardial necrosis comprising:

administering to an individual in need thereof an effective amount of a formulation comprising an encapsulated a bisphosphonate encapsulated within a suitable carrier, thereby minimizing damage resulting from the myocardial necrosis.

26. (currently amended) The method according to claim 25, wherein the bisphosphonate is encapsulated in suitable carrier is a liposome.

27. (withdrawn) A method of treating an acute myocardial infarction following by myocardial necrosis comprising:

administering to an individual in need thereof an effective amount of a formulation comprising an embedded bisphosphonate, thereby minimizing damage resulting from the myocardial necrosis.

28. (withdrawn) The method according to claim 27, wherein the bisphosphonate is embedded in a carrier selected from the group consisting of microparticles, nanoparticles, microspheres, and nanospheres.

29. (withdrawn) A method of treating an acute myocardial infarction following by myocardial necrosis comprising:

administering to an individual in need thereof an effective amount of a formulation comprising a particulate bisphosphonate, thereby minimizing damage resulting from the myocardial necrosis.

30. (withdrawn) The method according to claim 29, wherein the particulates are selected from the group consisting of aggregates, flocculates, colloids, polymer chains, insoluble salts and insoluble complexes.

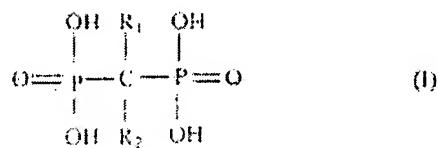
31. (original) The method according to claims 25, 27 or 29, wherein the formulation inhibits blood monocytes or tissue macrophages.

32. (original) The method according to claims 25, 27 or 29, wherein the formulation depletes blood monocytes or tissue macrophages.

33. (original) The method according to claim 31, wherein inhibition of said monocytes or macrophages occurs through phagocytosis of the formulation.

34. (original) The method according to claim 32, wherein depletion of said monocytes or macrophages occurs through phagocytosis of the formulation.

35. (original) The method according to claims 1, 2 or 3, wherein said agent has formula (I):



wherein R_1 is H, OH or halogen group; and

R_2 is halogen; linear or branched $\text{C}_1\text{--C}_{10}$ alkyl or $\text{C}_2\text{--C}_{10}$ alkenyl, optionally substituted by heteroaryl or heterocyclyl $\text{C}_1\text{--C}_{10}$ alkylamino or $\text{C}_3\text{--C}_8$ cycloalkylamino, where the amino may be a primary, secondary or tertiary amine; $-\text{NHY}$ where Y is hydrogen, $\text{C}_3\text{--C}_8$ cycloalkyl, aryl or heteroaryl; or $-\text{SZ}$, where Z is chlorosubstituted phenyl or pyridinyl.

36. (original) The method according to claim 1, 2, 3, 25, 27 or 29, wherein the formulation is administered following an acute myocardial infarction.

37. (original) The method according to claim 1, 2, 3, 25, 27 or 29, wherein the formulation is administered during an acute myocardial infarction.

38. (currently amended) A method of treating a patient immediately prior to the anticipated onset of acute myocardial infarction comprising administering to

the patient an effective amount of a formulation comprising an encapsulated a therapeutic agent encapsulated within a suitable carrier, wherein the formulation is capable of reducing a zone of infarct.

39. (original) The method according to claim 1, 2, 3, 25, 27 or 29, wherein the formulation is administered during reperfusion.

40. (currently amended) A method of treating a patient comprising administering to the patient an effective amount of a formulation comprising an encapsulated a therapeutic agent encapsulated within a suitable carrier, wherein the formulation is capable of reducing a zone of infarct and is administered immediately prior to or during a procedure where an acute myocardial infarction is probable.

41. (original) The method according to claim 40, wherein the procedure is a percutaneous transluminal coronary angioplasty.

Claims 42-63. (cancelled)

64. (currently amended) A method of reducing the zone of infarct following acute myocardial infarction comprising:

administering to an individual in need thereof an effective amount of a formulation comprising an encapsulated a bisphosphonate encapsulated within a suitable carrier.

65. (original) The method according to claim 64, wherein the bisphosphonate is encapsulated in a liposome.

66. (withdrawn) A method of reducing the zone of infarct following acute myocardial infarction comprising

administering to an individual in need thereof an effective amount of a formulation comprising an embedded bisphosphonate.

67. (withdrawn) The method according to claim 66, wherein the bisphosphonate is embedded in a carrier selected from the group consisting of microparticles, nanoparticles, microspheres, and nanospheres.

68. (withdrawn) A method of reducing the zone of infarct following acute myocardial infarction comprising:

administering to an individual in need thereof an effective amount of a formulation comprising a particulate bisphosphonate.

69. (withdrawn) The method according to claim 68, wherein the particulates are selected from the group consisting of aggregates, flocculates, colloids, polymer chains, insoluble salts and insoluble complexes.

70. (new) The method as in one of claims 1-3, wherein the formulation has a size range of 0.03-1.0 microns.